## FILING DATE IND. DEF SERIAL NO. APPLICANT(S) **CLAIMS ONLY** CLAIMS AFTER 1st AMENDMENT AFTER 2nd AMENDMENT AS FILED DEP. IND. OEP. IND. DEP. DEP. IND. レ TOTAL Ţ \_1 TOTAL IND. TOTAL DEP. TOTAL CLAIMS TOTAL DEP. \* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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